

13 CV 8117

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKTashon Spurgeon
990-13-00006

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Warden Stephen Wettstein
C.O. MASONDeputy PattersonDeputy ARBYDeputy WilliamsCaptain MORALESCaptain PITTMANCaptain HURLEYCaptain REEDCaptain MOORE / Captain Adams

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

COMPLAINT

under the

Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)Jury Trial: Yes No

(check one)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Tashon Spurgeon
ID # 990-13-00006
Current Institution O.B.C.C.
Address 1600 Hazen Street
East Elmhurst, N.Y. 11370

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name Warden Stephen Wettstein Shield # 1
Where Currently Employed OTIS BANTUM CORRECTIONAL CENTER
Address 1600 Hazen Street
East Elmhurst, N.Y. 11370

Defendant No. 2

Name C. O. MASON

Shield #

Where Currently Employed OTIS BANTUM CORRECTIONAL CENTERAddress 1600 HAZEN STREETEAST ELMHURST NY 11370

Defendant No. 3

Name DEPUTY PATTERSON

Shield #

Where Currently Employed OTIS BANTUM CORRECTIONAL CENTERAddress 1600 HAZEN STREETEAST ELMHURST NY 11370

Defendant No. 4

Name DEPUTY ARBY

Shield #

Where Currently Employed OTIS BANTUM CORRECTIONAL CENTERAddress 1600 HAZEN STREETEAST ELMHURST NY 11370

Defendant No. 5

Name DEPUTY WILLIAMS

Shield #

Where Currently Employed OTIS BANTUM CORRECTIONAL CENTERAddress 1600 HAZEN STREETEAST ELMHURST NY 11370Also with the same address and currently employed
#6 Captain Morales #7 Captain Pittman #8 Captain Hufley shield #
#9 Captain Reid #10 Captain Moore #11 Captain Adams 37

II. Statement of Claim

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

OTIS BANTUM CORRECTIONAL CENTER
1600 HAZEN STREET EAST ELMHURST NY 11370

B. Where in the institution did the events giving rise to your claim(s) occur?

O.B.C.C./C.P.S.U. INTAKE & O.B.C.C. MAIN INTAKE #3 South CPSU
#10 cell in CPSU. INTAKE, #11 cell in 3 South, 17 pen
in the main intake of O.B.C.C.

C. What date and approximate time did the events giving rise to your claim(s) occur?

OCTOBER 16th 2013 Through OCTOBER 21st 2013
On the 16th of Oct, 2013 I was in #10 cell in CPSU. INTAKE From
9 pm to 10 pm Oct 17th The next day, on the 17th of Oct, 2013
I was in CPSU. 3 South Housing area #11 cell up until the 18th of Oct 2013
2 pm Then placed in O.B.C.C. main intake #7 pen up until
The 21st of Oct 2013 2:30 pm

D. Facts: Captain Adams was The Area Captain, Captain Moore was The Security Captain of such Area and Deputy Patterson was the person that instructed these Captains to allow such matters to take place in The C.P.SU. intake 10 cell, where I was left Handcuff in a cell that had FECES all on The walls & Sink & to let AREA for 4 hours took cuffs off & left me in the same cell for 24 hours, no water, no food, no visits, no phones, deny me my mental Health medication, it was then placed in Another cell #113 South CPSU same conditions of cell area and Denied same things as well Food, medication, no water, no phone, no visit. 3 South Area Deputy on the 17th at 11th pm was Deputy Williams The Captain on the 18th of Oct, was Captain Moore as The Deputy was Dep. Patterson, who was also person who told such Captain to violate my right. I was then placed on ABC.C.C. intake #17 pen, where Captain Patterson was Area Captain on the 18th at 11:30 pm. 2013 Deputy Avery was Deputy of Area, on the 19th 20th & 21st of Oct. AM was Captain Harley Sheld #37, and on the PM tour was Captain Reid C.O. Mason was a post on take officer, officers mention between the 18th - 21 DENIED me phone, no medication, left me on a bench for 4 days without a bed or hot water Captain Harley threw personal property & pictures of family in the trash can, Captain Reid & C.O. Denied me food & water. DENIED medical treatment.

III. Injuries: I was placed on a holding AREA where I called my family to inform them of corr. 311th April of corr.

wasn't allowed my mental health medication, sickness, illness verbal abuse mental anguish, mental distress, emotional torture, vomiting, DENIED medical treatment.

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes No

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Rikers Island Otis Bancroft Correctional Center
1600 Haven Street, East Elmhurst, N.Y. 11370

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes No Do Not Know

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes No Do Not Know

If YES, which claim(s)? _____

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes No

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes No

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

O.B.C.C. - Law Library

1. Which claim(s) in this complaint did you grieve? All stated

ABOVE

2. What was the result, if any? Nothing resulted

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

Did not respond to grievance & ~~never~~
At no time, which I ~~ever~~ put two in the
grievance & Box Hand At O.B.C.C

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

N/A

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any: NO RESPONSE AT ALL

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. AS FOR THE ILLNESS, VERBAL ABUSE, mental distress, mental anguish and emotional torture I sustained it was ALLOWED TO SEE medical or see or speak to a mental Health doctor, or sign up for sick call for my medication, and issues. THESE DEPUTIES AND CAPTAINS & OFFICER DENIED ME SUCH ASSISTANCE, would not help me when ask to do so, I FILED THREE GRIEVANCES AND CALL IMMEDIATELY 311, and Board of Correction of such corruption

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). I AM SEEKING \$1250000 TOTAL FOR MENTAL DISTRESS, MENTAL ANGUISH, VERBAL ABUSE, EMOTIONAL TORTURE, EMOTIONAL & PHYSICAL ILLNESS AND DENIAL OF MEDICAL ASSISTANCE

VI. Previous lawsuits:

On these claims

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes No

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit: I.O. #

Plaintiff Jashon Spurgeon 990-13-00006

Defendants Warden Luis Rivera/Captain Johnson/Deputy Hill/Deputy Margarita
Captain Blake/C.O. Ellis/C.O. Lincoln/C.O. Rothwell

2. Court (if federal court, name the district; if state court, name the county) United States
District Court, Southern District of New York

3. Docket or Index number DATE 18, 2013 (DDC, NO. 10)

4. Name of Judge assigned to your case Richard J. Sullivan

5. Approximate date of filing lawsuit September 18th 2013

6. Is the case still pending? Yes No

If NO, give the approximate date of disposition Still Pending

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?)

CASE STILL PENDING.

On
other
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes No

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes No

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 28 day of October, 2013.

Signature of Plaintiff

Inmate Number

Institution Address

Tasha Springer
990-13-06006
O.B.C.C.
1600 Hazen Street
East Elmhurst N.Y. 11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 28 day of October, 2013 I am delivering this complaint to prison authorities to be mailed to the Pro Se Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Tasha Springer